

**Found at: <http://www.pww.org/article/articleprint/17062/>**

## Health care rallies: 'Big Insurance Makes Me Sick!'

Author: *Tim Wheeler*

OWINGS MILLS, MD.--Fighters for health care reform holding placards with slogans like “People Before Profit” and “Public Option Now” rallied outside health insurance company offices Sept. 22 to demand that Congress stop kowtowing to insurance profiteers and enact comprehensive health care reform.

More than 200 events were organized on the National Day of Action including a rally near United Healthcare (UHC) offices outside Baltimore. Nick Sheridan pointed at the brick office tower nearby and charged that insurance companies denied coverage for his daughter on false grounds that she had a “preexisting condition.” He added, “United Healthcare insures a lot of people in Maryland and they are using our premiums to lobby against health care reform.”

Several speakers blasted UHC, Cigna, and other health insurance giants of instigating the “disruptions” of lawmakers town hall meetings on health care, pressuring their employees to pack the meetings and scream and yell to intimidate members of Congress.



Dr. Joseph Adams, said he was forced to give up his primary care practice because the insurance companies reject so many claims for reimbursement, forcing physicians to file again and again. “Health insurance profits quadrupled in seven years to \$12.7 billion in 2007,” he said. “People lose their insurance when they get sick. It’s called a ‘recision’....What part of a strong public option is UHC afraid of?”

Matthew Weinstein, Maryland Coordinator of Health Care for America NOW lead the crowd in chanting, “Free choice, a must! Public option or bust.”

Karen Dawson, Howard County coordinator of MoveOn told the crowd that UHC, one of the two largest for-profit insurance companies in the nation posted \$4.65 billion in profits in 2007 and UHC CEO Stephen J. Helmsley has reaped \$750 million in compensation since he took over in 2006.

UHC’s California subsidiary, Pacificare, she said, was fined \$3.5 million on grounds that “30 percent of the HMO claims were wrongly denied and 29 percent of the disputes with doctors were handled incorrectly.” An investigation by the House Subcommittee on Oversight found that UHC, WellPoint, and Assurant Inc. cancelled coverage for 20,000 people “allowing the companies to avoid paying more than \$300 million in medical claims over a five-year period.”

UHC’s CEO, William McGuire, was forced to resign and pay \$468 million in fines to avoid going to trial on charges of backdating stock options to “allow insiders to maximize financial gains.”

Retired engineer, Michael Phillips, told the crowd he was in London, last year, when he was stricken with internal bleeding. He was admitted to a hospital and treated by the chief surgeon. Total cost? Not a shilling. Not even a pence, for prompt, first class treatment under Britain’s socialized medical system.

Soon after returning home, his sister visited from New Mexico bringing her daughter with a cast on her broken arm. They had been advised to take the young girl to have the cast checked out by a doctor. They searched all day and finally found a clinic in Virginia that charged \$300 for a simple examination. “I tell this story because it is such a contrast,” Phillips said.

He commented on the teabaggers who are attempting to break up the town hall meetings on health care. "They are nothing new," he said. "James Meredith faced this same hate when he integrated the University of Mississippi. The Black teenagers who integrated Central High School in Little Rock faced the same hate."

Angie Lee said her grand-daughter was struck with meningitis soon after she graduated from college. Treatment cost \$23,000. Her insurance company denied her claim on the absurd basis that the meningitis was a "preexisting condition." Only after she threatened to go to court did the company relent.

Musician Tobias Hurwitz said he too was "fully covered" with a policy sold by MegaLife & Health. Diagnosed with prostate cancer, he underwent a prostatectomy at Johns Hopkins Hospital. "With copays and out-of-pocket expenses, it cost me over \$10,000 even with so-called 'full' coverage," he said. He now pays his \$350 monthly insurance premium plus \$185 monthly to Hopkins Hospital and \$150 monthly to Hopkins University. "That adds up to \$685 just to stay even with my health care expenses. I would do better with a public option."

| [Back to normal page view](#) | [Send this article to a friend](#) |